

**ARLINGTON RECREATION DEPARTMENT**

**2008 PROGRAM EVALUATION**

PROGRAM NAME \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

Please read the following questions and fill in the blank with the corresponding number:

(5) Totally Satisfied; (4) Above Average; (3) Average; (2) Below Average; (1) Totally Dissatisfied.

1. \_\_\_\_\_ How satisfied were you with the program and program content?

2. \_\_\_\_\_ How satisfied were you with the instructor's knowledge and ability?

3. \_\_\_\_\_ How satisfied were you with the physical conditions of the facility?

4. \_\_\_\_\_ How well did the program meet your own needs or expectations?

5. **How did you find out about the program?**

\_\_\_\_\_ Friend \_\_\_\_\_ Brochure \_\_\_\_\_ Newspaper \_\_\_\_\_ Mailing \_\_\_\_\_ Website

\_\_\_\_\_ Other (please specify) \_\_\_\_\_

6. **General comments and suggestions:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we use your comments in our publications or advertising material?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

Name \_\_\_\_\_ Signature \_\_\_\_\_

8. **What programs would you like to see offered in the future?**

**Please use other side of form**

9. **Do you have internet access?** \_\_\_\_\_

10. **Would you be interested in receiving an e-mail about future programs?** \_\_\_\_\_

11. **E-Mail address** \_\_\_\_\_

*Thank you for your feedback!  
Please return to the Arlington Recreation  
422 Summer Street, Arlington, MA 2474*